

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant :	Kenneth L. Davis	Art Unit :	2173
Serial No. :	09/747,332	Examiner :	Namitha Pillai
Filed :	December 22, 2000	Confirmation No.:	1296
Notice of Allowance Date: January 11, 2007			
Title :	METHOD AND APPARATUS FOR CONVEYING DESIGN INFORMATION OF COMPUTER AIDED DESIGN (CAD) MODELS		

**MAIL STOP ISSUE FEE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed January 11, 2007, enclosed is a completed issue fee transmittal form PTOL-85b. Please deduct \$1400 for the required fee from Deposit Account No. 06-1050.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date: 11 April 2007



Daniel J. Burns  
Reg. No. 50,222

**Fish & Richardson P.C.**  
500 Arguello Street, Suite 500  
Redwood City, California 94063  
Telephone: (650) 839-5070  
Facsimile: (650) 839-5071

# **PART B – FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail**      **Mail Stop ISSUE FEE**  
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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26181                      7590                      01/11/2007

**FISH & RICHARDSON P.C.**  
**P.O. Box 1022**  
**Minneapolis, MN 55440-1022**

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/747,332	12/22/2000	Kenneth L. Davis	15786-007001	1296

TITLE OF INVENTION: METHOD AND APPARATUS FOR CONVEYING DESIGN INFORMATION OF COMPUTER AIDED DESIGN (CAD) MODELS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	04/11/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PILLAI, NAMITHA	2173	715-512000

- |   |  |  |
|---|--|--|
| <p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. <b>Use of a Customer Number is required.</b></p> | <p>2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p> | <p>1. <b><u>Fish &amp; Richardson P.C.</u></b></p> <p>2. _____</p> <p>3. _____</p> |
|---|--|--|

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
- PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.
- (A) NAME OF ASSIGNEE    (B) RESIDENCE (CITY and STATE OR COUNTRY)

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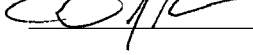
**San Rafael, CA**

Please check the appropriate assignee category or categories (will not be printed on the patent):    ☐ individual    ☒ corporation or other private group entity    ☐ government

- |   |   |
|---|---|
| <p>4a. The following fee(s) are enclosed:</p> <p><input checked="" type="checkbox"/> Issue Fee</p> <p><input type="checkbox"/> Publication Fee (No small entity discount permitted)</p> <p><input type="checkbox"/> Advance Order - # of Copies _____</p> | <p>4b. Payment of Fee(s):</p> <p><input type="checkbox"/> A check in the amount of the fee(s) is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>06-1050</u> (enclose an extra copy of this form).</p> |
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5. **Change in Entity Status** (from status indicated above)
- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.                      ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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(Authorized Signature)  \_\_\_\_\_

Typed or Printed Name    Daniel J. Burns

(Date)                      April 11, 2007

Registration No. 50,222

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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